

Application Data Sheet**Application Information**

Application Type:: Reissue
Subject Matter:: Utility
Suggested Group Art Unit:: 1743
CD-ROM or CD-R?:: None
Sequence submission?:: None
Computer Readable Form (CRF)?:: No
Title:: APPARATUS FOR PERFORMING ASSAYS AT REACTION SITES
Attorney Docket Number:: B1102.70015US01
Request for Early Publication?:: No
Request for Non-Publication?:: No
Small Entity?:: Yes
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Allyn
Family Name:: Hubbard
City of Residence:: Medfield
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 120 South Street
City of mailing address:: Medfield
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02502

Applicant Authority Type:: Inventor
Primary Citizenship Country:: India
Status:: Full Capacity
Given Name:: Samesh
Family Name:: Kale
City of Residence:: Burlington
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 1216 Arboretum Way
City of mailing address:: Burlington
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 01803

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Scott
Middle Name:: A.
Family Name:: Rollins
City of Residence:: Oxford
State or Province of Residence:: CT
Country of Residence:: US
Street of mailing address:: 104 Quaker Farms Road
City of mailing address:: Oxford
State or Province of mailing address:: CT
Postal or Zip Code of mailing address:: 06478

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jeremy
Middle Name:: P.

Family Name:: Springhorn
City of Residence:: Guilford
State or Province of Residence:: CT
Country of Residence:: US
Street of mailing address:: 122 Forest Brook
City of mailing address:: Guilford
State or Province of mailing address:: CT
Postal or Zip Code of mailing address:: 06437

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Stephen
Middle Name:: P.
Family Name:: Squinto
City of Residence:: Bethany
State or Province of Residence:: CT
Country of Residence:: US
Street of mailing address:: 16 Coachman's Lane
City of mailing address:: Bethany
State or Province of mailing address:: CT
Postal or Zip Code of mailing address:: 06524

Correspondence Information

Correspondence Customer Number:: 23628

Representative Information

Representative Customer Number:: 23628

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Reissue of	09/134141	08/14/98
09/134141	An application claiming the benefit under 35 USC 119(e)	60/055792	08/15/97

Foreign Priority Information**Assignee Information**

Assignee name:: BioProcessors Corp.
Street of mailing address:: 235 Montgomery Street
City of mailing address:: San Francisco
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94104